



ASC Utilization Report
State Form 49933 (R3/6-05)
Indiana State Department of Health
Acute Care

Status: Finalized

I. Center Identification

Organization Name: SAINT CHARLES SURGICAL PAVILION

Street Address: 1900 Saint Charles Street

City: Jasper

County: Indiana

Administrator Name: Erica Snell

Administrator Email: scsp@norrisblessinger.com

ASC Web Address:

Fiscal Year: 2020

Accredited: Yes No

Name of Accrediting Body: Joint Commission

Deemed Status: Yes No

Corporate Tax Status: For Profit Non Profit

II. Identification of Surgical Resources

Number of operating rooms	1
Number of procedure rooms	0

III. Utilization Statistics

A. Total Patients and Procedures		
Time Period	Number of Patients	Number of Procedures

Persons Served in twelve-month period	1465	2368
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
64483	337	
62323	174	
64721	113	
29881	71	
63030	55	
26055	43	
27095	37	
27093	37	
27447	36	
27096	35	

IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter.	5
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